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COUNTY BOROUGH OF WARRINGTON



ANNUAL REPORT

TO THE

EDUCATION COMMITTEE

ON THE WORK OF THE

SCHOOL HEALTH SERVICE

FOR THE YEAR


1964

ERIC H. MOORE

B.Sc., M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

*Medical Officer of Health and
Principal School Medical Officer*

HEALTH AND WELFARE DEPARTMENT, SANKEY STREET,
WARRINGTON



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WARRINGTON

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SCHOOL MEDICAL SERVICE SUB-COMMITTEE

(As at 31st December, 1964)

Chairman :

Alderman E. MARSHALL, M.B.E., J.P.

Alderman J. CANON BARDSLEY, M.A., J.P.

Alderman H. GRAY, J.P.

Alderman H. HARDING

Alderman Mrs. M. HARDMAN

Alderman P. MARTIN, J.P.

Councillor B. S. ARNOLD

Councillor R. G. CROCKER

Councillor W. H. HEALEY

Councillor Mrs. A. L. HINDLE

Rev. J. A. CUNNINGHAM, O.S.B.

Rev. J. RUSSELL

Ex-Officio :

Councillor J. A. ORANGE, J.P. (Mayor)

Rev. CANON E. DOWNHAM, B.A.
(Deputy-Chairman of the Education Committee)

Chief Education Officer : H. M. PHILLIPSON, M.A.

STAFF

(As at 31st December, 1964)

Principal School Medical Officer :

ERIC H. MOORE, B.Sc., M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

Deputy Principal School Medical Officer :

ANGELA MANNING, M.R.C.S.(Eng.), L.R.C.P.(Lond.), D.P.H.

School Medical Officers :

MARY GRAHAM, M.B., Ch.B., D.P.H.

THOMAS F. LEONARD, M.B., Ch.B., D.P.H.

WILLIAM G. CHARLESWORTH, M.B., Ch.B. D.P.H.

Principal School Dental Officer :

A. P. FINLAY, L.D.S., R.F.P.S.(Glas.)

School Dental Officers :

Mrs. PHYLLIS E. LAWTON, L.D.S.

Mrs. PRUDENCE GOFF, B.D.S. (part-time)

C. H. TAYLOR (part-time)

Dental Auxiliary :

Mrs. HEATHER GIBSON

Educational Psychologist :

Mrs. C. M. RIVETT, B.A.(Lond.), M.A.(Manc.), Post-graduate
Certificate in Education (Lond.)

Superintendent Nursing Officer :

Miss A. N. AGAR, S.R.N., S.C.M., H.V.(Cert.)

Ear, Nose and Throat Clinic :

P. O'BRIEN, M.D.

Visiting Consultants :

Ophthalmic : SYDNEY B. SMITH, M.R.C.S., L.R.C.P., D.O.M.S.(R.C.P. & S.)

Child Psychiatrist : Dr. I. BERMAN, M.B., Ch.B., D.P.M.

Orthodontist : J. ANGELMANN, L.D.S., H.D.D., F.D.S., R.C.S.(Edin.)

SCHOOL CLINICS

A. PROVIDED BY LOCAL EDUCATION AUTHORITY

INSPECTION CLINIC

Mon., Wed., Fri., 9-0 a.m. to 9-45 a.m.	Examination of cases referred by Teachers, Education Welfare Officers, School Nurses, etc.
--	--

MINOR AILMENTS CLINIC

Monday to Friday 9-0 a.m. to 9-45 a.m.	Treatment of contagious diseases of the skin, eyes, etc.
Saturday 9-30 a.m. to 11-30 a.m.	Vaccination and immunisation.

DENTAL CLINIC

Monday to Friday (by appointment)	Dental treatment (including orthodontic treatment)
Daily 9-20 a.m. to 10 a.m.	Emergency treatment.

EAR, NOSE AND THROAT CLINIC

Examinations : Alternate Mondays 2-0 p.m.
Out-Patient treatment : Daily (by appointment).
Operations are performed at the Warrington General Hospital on
Tuesday, Wednesday and Thursday mornings.

CHILD GUIDANCE CENTRE

Child Psychiatrist (Monday a.m. and Wednesday p.m.—by
appointment).
Educational Psychologist (Daily by appointment).

CHIROPODY SERVICE

Cases seen by appointment.

B. PROVIDED BY REGIONAL HOSPITAL BOARD

PÆDIATRIC CLINIC (Warrington General Hospital)

Monday a.m., Tuesday a.m., Wednesday p.m. (by appointment)

ORTHOPÆDIC CLINIC (Warrington General Hospital)

Examinations—Every fourth Tuesday, 10-0 a.m.

Treatment :

Friday 9-30 a.m. to 11 a.m.	Treatment of postural and crippling defects, etc.
--------------------------------	--

OPHTHALMIC CLINIC (Warrington General Hospital)

Monday, 1-30 p.m.	Examination and treatment of errors of
Friday, 9-30 a.m. (by appointment)	refraction and squint.

ORTHOPTIC CLINIC (Warrington General Hospital)

Monday, 9-0 a.m. to 4-30 p.m.	} Treatment of cases of squint.
Friday, 9-0 a.m. to 4-30 p.m.	

To the Chairman and Members of the Education Committee

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have pleasure in submitting my Annual Report on the work of the School Health Service for the year 1964.

There has been no change in the organisation of the service, which is still directed mainly to the detection of handicapped children and providing them with the appropriate educational treatment. The system of selective medical examination has continued and has been, in all respects, satisfactory. It is essential that the entrant examination shall be exceptionally thorough, and providing the special examinations are supported by routine testing of vision by audiometry and by regular visits of nurses and doctors to the schools, it provides a better co-ordinated service than the previous system of three or four routine medical examinations.

We have been fortunate during the year with regard to staffing. In the middle of the year a new Speech Therapist took up the appointment vacated 12 months previously, and dental staffing has been quite adequate. The appointment of a Dental Auxiliary has helped with routine dental work and has allowed a start to be made on Dental Health Education.

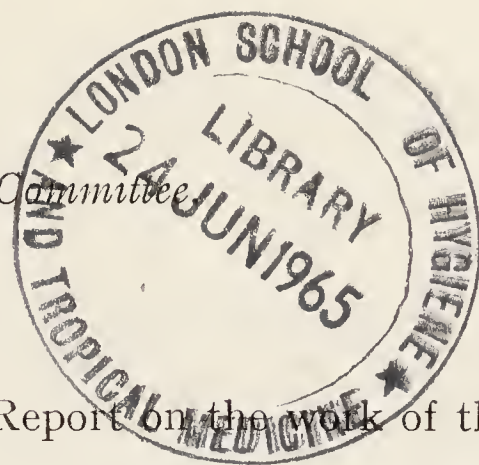
Co-operation between the School Health Service and other branches of the medical and dental services, both within the local authority and outside it, has been excellent. Particularly of note are the good relations existing between the Education Department and the Health Department, and I would specially wish to acknowledge the co-operation and assistance received from the Chief Education Officer on many occasions. The Chairman and members of the School Medical Service Sub-Committee have given their unfailing interest and support at all times, and this has been a great encouragement to all who work in the service.

I have the honour to be,

Your obedient Servant,

ERIC H. MOORE,

Principal School Medical Officer.



THE SERVICE

The service continued to operate on the same lines as in the previous year and selective medical inspection has continued to prove satisfactory. The service aims primarily at the ascertainment of handicaps and recommending appropriate educational treatment most suited to the child. The attachment of a school medical officer to specified schools with periodic informal visiting has continued.

The co-operation between all branches of the National Health Service has remained excellent and I am very grateful for the ready co-operation received from general practitioners and hospital staff.

MEDICAL INSPECTION

The system of inspecting routinely only entrants and leavers was continued, the gap between being covered by the visits of school medical officers to the schools to which they are attached.

The statistics of medical inspection are contained in Table 'A' and 'B' of Parts I and II of the Appendix.

Special medical examinations were carried out at the request of teachers, school nurses, parents and other bodies when children were suspected of needing medical or other educational treatment. Special examinations were also carried out on 200 children to ascertain their fitness for employment and 4 were found to be unfit.

The following tables give the average heights and weights of the 6 year old group covering a period of 50 years, and the average heights of the 14 year old group for the past 15 years. It will be seen that there has been a marked increase in the height and weight in most groups over the period reviewed, which reflects the manner in which the social circumstances of the population have improved in the last half century and 15 years respectively.

AVERAGE HEIGHTS OF 6 YEARS OLD GROUP

Years	1913	1918	1923	1928	1933	1938	1943	1948	1953	1958	1962	1963
	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.
Boys	3 4 $\frac{1}{4}$	3 4	3 6	3 5 $\frac{1}{2}$	3 6	3 6	- -	3 8 $\frac{1}{4}$	3 7 $\frac{1}{2}$	3 6 $\frac{1}{2}$	3 7 $\frac{1}{2}$	3 7 $\frac{1}{2}$
Girls.....	3 3 $\frac{1}{2}$	3 4	3 5	3 5	3 6	3 6	- -	3 8	3 7	3 8 $\frac{1}{4}$	3 7	3 7 $\frac{1}{4}$

AVERAGE WEIGHTS OF 6 YEARS OLD GROUP

	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.
Boys	2 9 $\frac{1}{2}$	2 9 $\frac{1}{2}$	2 13 $\frac{1}{2}$	2 12 $\frac{1}{2}$	2 13	3 0 $\frac{1}{2}$	- -	3 3	3 1 $\frac{1}{2}$	3 2 $\frac{3}{4}$	3 1	3 1 $\frac{3}{4}$
Girls	2 7 $\frac{1}{2}$	2 8 $\frac{1}{2}$	2 11 $\frac{1}{2}$	2 11	2 11 $\frac{3}{4}$	2 13	- -	2 13	3 0	3 1	2 13 $\frac{3}{4}$	3 0

AVERAGE HEIGHTS OF 14 YEARS OLD GROUP

Years	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963
	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.	ft. ins.
Boys	5 1	5 1	5 1	5 2	5 1	5 1 $\frac{1}{2}$	5 2 $\frac{1}{2}$	5 1 $\frac{3}{4}$	5 2 $\frac{1}{2}$	5 2 $\frac{1}{2}$	5 1 $\frac{3}{4}$	5 3	5 4	5 3	5 3
Girls	5 0 $\frac{1}{2}$	5 1	5 0 $\frac{1}{2}$	5 1	5 0 $\frac{1}{2}$	5 1	5 1	5 1	5 1	5 1 $\frac{1}{4}$	5 0 $\frac{1}{2}$	5 1 $\frac{1}{2}$	5 1 $\frac{3}{4}$	4 11 $\frac{1}{2}$	5 1 $\frac{3}{4}$

AVERAGE WEIGHTS OF 14 YEARS OLD GROUP

	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.	st. lbs.
Boys	7 5	7 3 $\frac{1}{2}$	7 7 $\frac{1}{2}$	7 9	7 6	7 3 $\frac{1}{2}$	7 11	7 5 $\frac{1}{2}$	7 8 $\frac{1}{2}$	7 8 $\frac{1}{2}$	7 12	7 12	8 0	8 0	7 12 $\frac{1}{4}$
Girls	7 6	7 7	7 4	7 5 $\frac{1}{2}$	7 6	7 7	7 7 $\frac{1}{2}$	7 8	7 9 $\frac{3}{4}$	7 10	7 11	7 11	7 13	7 12	7 11 $\frac{3}{4}$

EAR, NOSE AND THROAT CLINIC

This Clinic continued under the charge of Dr. O'Brien, a visiting General Practitioner, with special experience in Ear, Nose and Throat conditions. To this clinic are referred cases which have shown two failures on audiometric testing.

Dr. O'Brien has expressed concern that, on occasions, parents, head teachers and teachers responsible for games have not been fully aware of the danger to children with any infection of the upper respiratory tract being compelled or allowed to go swimming. In many cases, disease of the middle ear and other sinuses is provoked in this way. Attempts are being made to ensure that schools are aware of those children who have such diseases. The fact that all cases are not dealt with through the School Health Service makes it difficult to ensure that no errors are made.

ENURESIS CLINIC

This Clinic, for persistent bed-wetters, was started nearly five years ago, and is now regarded as a well-established part of the services.

Referrals come from School Medical Officers, School Nurses and General Practitioners. Each patient is examined by the Medical Officer responsible for the Clinic and suitable cases are issued with a bell-alarm and two sets of foils, together with instructions for their use.

Each case is kept under observation during the period of treatment. The success of the treatment depends on the co-operation of the patient and of the parents.

38 new cases were treated during 1964, and of these, treatment in 25 was regarded as successful.

AUDIOMETRY

Routine audiometric examinations are carried out on all school entrants, and on all children suspected of defective hearing. Preliminary testing is carried out in schools, but failures are re-tested at the clinic, double failures being referred to the Ear, Nose and Throat Consultant at his Special Clinic, and in special cases, to the Department for the Deaf of the University of Manchester.

A nurse is employed part-time on this work. The table below gives details of tests carried out, and the disposal of the cases where a double failure was recorded.

Audiometric Tests

Primary Tests					
Number of schools visited	...	...	...	...	34
Number of group tests	...	...	...	...	112
Number of children tested	...	...	...	...	1820
Number of Primary failures	...	...	...	...	202
Secondary Tests					
Number of group tests	...	...	...	...	75
Number of children tested	...	...	...	...	302
Number of double failures	...	...	...	...	200
Disposal of Cases					
Nothing abnormal found after treatment	...	...	...	...	10
Receiving treatment	...	...	...	...	36
Referred for operative treatment	...	...	...	...	69
Treatment not beneficial	...	...	...	...	5
Still receiving treatment (from previous years) or investigation	...	...	...	...	33
Treatment refused	...	...	...	...	1

TREATMENT

A minor ailments clinic is held each morning to which teachers may refer children. Cases may also be sent by parents and general practitioners. The types of defects referred are usually in need of nursing attention. 686 children attended the clinic in 1964.

The arrangements for the treatment of visual defects continued through the hospital service as in previous years, except when parents wish otherwise. The statistics will be found in Table 'A', Part III of the Appendix. 239 schoolchildren and 162 pre-schoolchildren were the recorded attendances at the Orthoptic Clinic at Warrington General Hospital in respect of Borough children.

A special clinic is held to which Ear, Nose and Throat cases are referred for Consultant advice. During the year 177 children made 355 attendances at this special clinic. Many children are also referred by general practitioners to the hospital service for E.N.T. treatment.

Orthopædic problems are referred to the hospital service.

General medical problems are referred to the Pædiatric Out-Patient Clinic, and considerable assistance is received in the reports of the Consultant Pædiatrician.

SPEECH THERAPY CLINIC

After a twelve month interval the Speech Therapy Clinic was re-opened in September, 1964. All cases who had been receiving treatment or who had been under observation when the last Speech Therapist left, were reviewed. Many of these were found to have reached a normal standard of speech, and were, therefore, discharged. Treatment was recommenced for those still requiring it. All the cases on the waiting list and new cases referred by doctors, health visitors and the educational psychologist were interviewed. As many as possible were taken for regular treatment, and the rest remained on the waiting list. Due to the invaluable help from the staff of the School Health Service Section, the Clinic was soon running smoothly again.

On account of the inevitably slow turnover of patients, it is necessary to take into account the severity of the handicap to each individual child, and to give regular appointments to those who are most in need of treatment, or who would benefit most from it, rather than to go through the waiting list in strict chronological order of date of referral.

The close association with other departments is of immense value to speech therapy, especially that with the educational psychologist as intellectual and emotional problems are often closely bound up with problems of speech and language. Also that with the audiometric nurse, as speech is vitally dependent on hearing. The close link with the schools is also of great value; visits were made to eighteen Warrington Schools before the end of the year, to discuss with the staff the pupils who are attending for speech therapy.

No. of new patients seen	...	...	...	...	...	31
No. of new patients accepted for regular treatment	...					23
No. of new patients placed under observation	...	...				6
No. of new patients not requiring treatment	...	...				2
No. of patients discharged	...	...	...	...	...	66
Treatment complete	...	...	...	...	...	39
Not suitable for further treatment			...	...	...	3
Left district	...	...	...	...	...	4
Refused treatment	...	...	...	...	...	1
Non-attenders	...	...	...	...	...	18
Referred for other forms of treatment	...	...	...	...	...	1
Total number of attendances	...	...	...	...	...	515
No. of cases receiving regular treatment on the 31st December, 1964	...	...	...	...	...	45
No. of cases remaining under observation	...	...	...	...	...	30

THE WORK OF THE SCHOOL NURSES

School nurses are allocated certain schools for which they are responsible to a School Medical Officer, each School Medical Officer thus being able to give special attention to a group of schools and also being able to consider the cases referred by the School Nurses of the particular group of schools. By this arrangement a closer degree of co-operation between Head Teacher, School Medical Officer and School Nurse is possible which is greatly to the benefit of pupils.

A cleanliness inspection of all children is carried out in every school each term. The school nurse endeavours to complete this inspection as early in the term as possible. Each child is examined for pediculosis, cleanliness of body and clothing, and condition of footwear. Any unsatisfactory condition is dealt with and followed up on subsequent visits to the school. Where necessary, domiciliary visits are made to effect a remedy.

A nurse accompanies the medical officer on all routine medical inspections. Her duties include the weighing and measuring of children, vision testing, and the preparation of the children for examination. In addition, she prepares the children for immunisation where necessary, and obtains any information required from the teachers regarding the health of the children to be examined and of any other children whom the teacher may wish to bring to the notice of the medical officer. The school nurses carry out routine vision testing on all schoolchildren in alternate years. The testing is done by classes in schools. School nurses also give lectures on selected subjects of Health Education at the request of Head Teachers.

At the clinic, the nurse is engaged in the treatment of the children for minor ailments and disinfection.

In the cases of uncleanness the course of action laid down in Section 54 of the Education Act is followed. Cleansing Notices were issued in 52 cases. It was necessary to issue 2 Cleansing Orders for the compulsory cleansing of children at the cleansing station. No prosecutions were necessary in the year under review.

Some brief details of the work carried out by the school nurses are given below :—

	1964	1963
Visits to homes of children (in many cases assisting with treatment)	215	220
Attendance at medical inspections in schools ...	259	268
Visits to schools for cleanliness inspections and re-inspections	464	456
Number of cases of uncleanness treated at the school clinic	111	97
Number of attendances of uncleanness cases at the school clinic	332	282

CHILD GUIDANCE CLINIC

REPORT OF THE CONSULTANT PSYCHIATRIST

The statistics for the year under review are as follows :

No. of clinic sessions held	...	...	...	85
No. of new cases	...	...	...	52
Total number of interviews (new and old cases)				280
No. of children who received in-patient treatment	...	...	...	12
No. of closed cases	...	...	...	53

New Cases :

From whom referred :

School Medical Officers	...	...	...	13
Educational Psychologist	...	...	...	7
Consultant Paediatrician	...	...	...	11
General Practitioners	...	...	...	17
Miscellaneous	...	...	...	4

During the year there was a considerable increase in the proportion of cases referred by general practioners. The Consultant Service at the Clinic is provided by Dr. Berman at two sessions per week by arrangement with the Liverpool Regional Hospital Board, and I am most grateful for the co-operation which we have received from this service throughout the year.

THE WORK OF THE EDUCATIONAL PSYCHOLOGIST

The school psychological service is not organised solely around the ascertainment of slow learning children but is also a preventive service. Close links between the doctors allocated to individual schools, the psychologist, the school nurses and the teaching staffs ensure speedy and satisfying co-operation among those concerned with the child's physical, emotional and intellectual welfare. Children between the ages of two and eighteen years who are intellectually backward, or who are unadjusted to learning due to minor handicaps or their social situation, may be referred by a head teacher, a school medical officer or a consultant.

Age range of children interviewed (Total 150)

Ages ...	4-5	5-6	6-7	7-8	8-9	9-10	10-11	11-12	12-13	13-14	14-15
Year of birth	1959	1958	1957	1956	1955	1954	1953	1952	1951	1950	1949
Number ...	11	21	39	22	12	15	18	4	3	2	3

This year half the cases were below the age of seven.

Most of the cases are recommended for investigation by teaching staff. A few cases are put forward for the opinion of the consultant child psychiatrist, but for the most part the service is educational and advisory.

Social worker guidance is sought through collaboration with educational welfare officers, school nurses and those engaged in the services of child-care, child liaison, or probation. In the work set out below, we acknowledge help received from these and other social agencies :

New cases undertaken	...	...	...	...	...	154
Referred by School Medical Officers	...	...	...	...	...	10
Referred by Head Teachers	...	...	...	...	...	117
Referred by Consultant Psychiatrist	...	...	...	...	...	20
Other sources	...	...	...	...	...	7
Additional Tests	...	...	...	...	...	62
Retests	...	...	...	...	...	57
Total number of tests administered	...	...	...	...	...	273
Return visits of old cases	...	...	...	...	...	135
No. of visits paid to schools	...	...	...	...	...	98
No. of cases dealt with in schools	...	...	...	...	...	536

Following diagnosis of the child's difficulties suggestions are made to the parent attending and to head teachers in connection with the patient's needs, personality and management. Records are kept and the child's progress determines any further action like retest, return visit, placement, or closure of the case.

I.Q. range of children tested on Terman-Merrill Scale (Total 140) :

I.Q. Range	Below 55	56-70	71-85	86-95	96-105	106- 115	Over 115	Total
Boys ...	1	16	39	29	8	5	7	105
Girls ...	2	6	15	9	1	2	0	35

WORK WITH THE SCHOOLS

Children with special problems such as serious subnormality or impaired hearing are interviewed within the Clinic, but the psychologist visits schools regularly to carry out tests and to talk over with the head teacher the findings during the examination.

The links between the school psychological service and the schools have been strengthened this year by two measures, by an experiment in screening and a series of talks to teachers.

SCREENING

In order to bring early help to children educationally at risk teachers this year applied the Carlton Picture Intelligence Test to all children around the age of seven. We intend to assess the dullest children on the Terman-Merrill Scale L-M, but meanwhile interesting results have been further explored at the request of head teachers ; for example, a child with high I.Q. but poor achievements or a child with known brain damage yet progressing well in the basic subjects, and some children seemingly unable to follow spoken instructions, despite normal hearing.

TALKS ON DEVELOPMENTAL DYSLEXIA

In order to lead to sympathetic understanding and to more effective work for children suffering from a reading or writing disability, all teachers in Infants, Junior and Senior Schools have received notes on these handicaps. The psychologist has, since then, given talks on dyslexia, its manifestations and diagnosis, and to date has given 14 short addresses establishing contact with 185 teachers. More widespread recognition of the fact that children may have inherent tendencies which delay mastery of the basic subjects is a necessary preliminary to any special educational treatment inside an ordinary school. It is generally realised that the personality of a child can be seriously affected unless the accompanying emotional strains are alleviated, and it is hoped during 1965 to interest yet more teachers in this particular handicap, which is sometimes found in children of average intelligence whom they themselves have referred to the Centre.

HANDICAPPED PUPILS

NUMBERS OF HANDICAPPED PUPILS

The following table gives the numbers of pupils on the Handicapped Pupils' Register on the 31st December, 1964, together with the numbers ascertained during the year.

Classification	No. ascertained during year	Total ascertained at 31.12.64
Blind	—	—
Partially-sighted	—	4
Deaf	3	5
Partially-hearing	1	6
Delicate	—	6
Physically-handicapped	2	7
Educationally sub-normal	35	213
Maladjusted	—	2
Epileptic	1	1
Totals	42	244

PROVISION OF SPECIAL EDUCATION

The table below gives details of the numbers of pupils for whom special educational facilities have been provided.

Classification	Attending special school as		Receiving education under arrangements made under Section 56 of Education Act, 1944		Total
	Day Pupils	Boarders	In Hospital	At Home	
Partially Sighted	3	1	—	—	4
Deaf	—	3	—	—	3
Partially-hearing	—	5	—	—	5
Delicate	—	2	2	2	6
Physically-handicapped...	—	4	1	2	7
Educationally sub-normal ...	175	13	—	—	188
Maladjusted	—	1	—	—	1
Epileptic	—	1	—	—	1
Totals	178	30	3	4	215

The following handicapped pupils requiring special educational provision are still unplaced :—

Deaf	...	...	...	...	...	2
Partially Hearing			...	...	...	1
Delicate	...	...	...	...	...	2
Educationally sub-normal			...	...		25
Physically handicapped			...	...		1
Maladjusted	...	...	...	...		1

The Special Day School for Educationally Sub-normal children has made good progress during the year.

EDUCATIONALLY SUB-NORMAL PUPILS

There are 213 pupils ascertained as educationally sub-normal of whom 13 are in special residential schools. The needs of the majority of the others are met in the day special school.

In addition a number of children have been ascertained in this category who, although not requiring accommodation in special schools, do require special treatment in the ordinary schools. These, of course, are in the higher grades of sub-normality.

During the year 69 children were tested, with the following results :—

Suitable for special (day) schools	...	...	33
Suitable for special (residential) schools		...	2
No action necessary	...	...	18
Reported to the Local Health Authority under Section 57, Education Act, 1944, as amended by Mental Health Act, 1959	...	...	9
No action taken—to be retested later	...	...	7
Total	...	...	69

There are at present 213 children in this category, 25 of whom are awaiting special educational treatment.

CHILDREN RECEIVING HOME TUITION

On the 31st December, 1964, there were 4 handicapped pupils on the home teacher's register. Of these, 2 were physically handicapped, and 2 were delicate.

INFECTIOUS DISEASES AND IMMUNISATION

INFECTIOUS DISEASES

The notifiable diseases occurring among schoolchildren and notified to the Medical Officer of Health were as follows :—

				1963	1964
Tuberculosis (respiratory)	...	...		1	—
Tuberculosis (non-respiratory)	...	...		—	1
Scarlet Fever	...	...	...	26	30
Whooping Cough	...	...	...	36	24
Measles	...	...	...	403	285
Pneumonia	...	...	...	3	11
Meningococcal Infection	...	...		—	1
Totals	...	...	...	469	352

IMMUNISATION

Special efforts are made to secure complete immunisation of schoolchildren at the time of the entrant examinations and the necessary ' booster ' injections are given in school as required.

Diphtheria : The number of children immunised during the year at school and at the clinic was as follows :—

Primary Courses	...	...	...	275
Secondary (Reinforcement)	...	...	...	1371
Total	...	...	...	1646

Poliomyelitis: The number of school children immunised during the year was as follows :—

Injections :

Booster—3rd injection	...	...	...	1
Booster—4th injection	...	...	...	1

Oral Vaccine :

Completed Course (1st, 2nd and 3rd)	...	133
Booster—3rd dose	...	6
Booster—4th dose	...	672

Totals of 2 injections and 1077 doses of oral vaccine were thus given to schoolchildren during the year.

B.C.G. : Vaccination is available to all children in the 13 year old group.

No. of Mantoux Tests performed	...	1247
„ Mantoux Tests negative .	...	1136
„ B.C.G. vaccinations performed in school	... ..	1136
Acceptance Rate...	... ..	76.08%

ANCILLARY SERVICES

NURSERY CLASSES

Children attending the nursery classes at the infants' schools are examined every year. Details of the examinations will be found under the heading "Periodic Medical Inspections" in Part I, Table 'A', in the Appendix. 143 children were examined during the year.

These children are also examined by the dental officers as part of the routine dental inspections of the infants' schools.

All the facilities of the school health service are available to nursery children. Particulars of treatment are included in the various treatment tables in this report.

The school nurses also visit the nursery classes when carrying out their cleanliness inspections. Statistics are included in the appropriate tables.

PROVISION OF MILK AND MEALS

Milk : Arrangements for the supply of milk in one-third pint bottles under the Milk in Schools Scheme have continued on the same lines as in previous years.

Meals : The Education Committee had fifteen School Kitchens supplying meals to schools throughout the year. Mid-day meals are served in all the schools. The charge is 6d. per day for the children attending special schools, and 1/- per day for children at other schools. Free meals are supplied to children of parents whose income is within the national scale.

The following table shows the average number of meals supplied per day during the year 1964.

Average No. of pupils on Roll	Received free meals	Received meals for payment	Total	Percentage of pupils receiving meals
12,423	590	5,992	6,582	52.9

During the week ending 9th October, 1964, 34,559 children's meals were supplied—this figure is the highest recorded figure of children's meals served in any week since the commencement of the School Meals Service in Warrington.

PHYSICAL EDUCATION

Interest and progress in all aspects of Physical Education has been maintained throughout the year. All schools provide sound programmes of physical activities varying according to facilities and based on a solid foundation of apparatus provided by the Authority.

The usual full programme of competitions in the major games, swimming and athletics, has again been organised and conducted by the Warrington Teachers Sports Associations. Gradually increasing and improving facilities have obviously assisted this work, particularly in the organisation of inter-town events.

The Authority's Swimming Scheme for Primary and Secondary Schools has again proved of great value both in the numbers of schoolchildren learning to swim and in the results of the examinations of the Royal Life Saving Society and the Liverpool Shipwreck and Humane Society. The generosity of the Baths Committee in presenting Free Passes to schoolchildren successful in examinations has once more been a great incentive.

The programme of evening classes at the Borough Gymnasium and other Centres including Youth Clubs has attracted a most satisfactory number of young people throughout the year. The Borough Gymnasium has also been used for many special events by local organisations.

The Authority's provision of such a wide range of activities for all age groups in schools and centres of all kinds is most satisfactory and contributes greatly to the development of Physical Education in Warrington and District.

PRINCIPAL SCHOOL DENTAL OFFICER'S REPORT

by A. P. FINLAY, L.D.S., R.F.P.S.

When last I wrote my annual report, I was, I am afraid, in a rather pessimistic frame of mind regarding the future of the School Dental Service, and I said so. What I did not know then, was that two years would elapse before I wrote my next report, and I would like to say here how much I regretted being unable to add my little contribution to the report on the work of the School Health Service for 1963. I had said in my last report that we had now reached the stage where, like Mr. Micawber, we kept waiting for "something to turn up." Well something turned up alright, but hardly in the way which I had been hoping for. Illness necessitated my entering hospital for surgical operation at the beginning of January, this occupying my attention for the next three months. My return to duty was shortly followed by Mrs. Lawton having a prolonged absence owing to illness, but happily both of us appear to have made good recoveries. On the credit side we were fortunate in being able to appoint in January two new part-time Dental Officers, Mr. H. Goff and Miss P. Hargreaves, both of whom came to us on the recommendation of Mrs. P. Hobson of the Children's Dentistry Department of the Manchester Dental School. I am very grateful to Mrs. Hobson for her interest in putting us in touch with potential candidates for the School Dental Service. Mr. Goff left us in April to go into general practice, shortly after which it gave us all great pleasure to congratulate Miss Hargreaves on becoming Mrs. Goff. Fortunately, the martial state has not prevented her from remaining a member of the staff, and along with Mr. Taylor and Mrs. Williams, she has made a valuable contribution to the year's work.

And what now of the future? In the latter part of the year, in accordance with the experiment being run by the General Dental Council, we appointed Mrs. H. Gibson our first ever Dental Auxiliary. This young lady commenced her duties at the beginning of December, too late to make any real impact on 1964, but I feel that her specialist training in the realm of Dental Health Education will reap dividends in the months to come. This is a subject which has in the past been rather neglected owing to shortage of staff. Then again, in the latter part of the year we were successful in appointing a new full-time Dental Officer to commence at the beginning of 1965. This appointment was interesting in so far as it was a reversal of today's usual trend, in other words, from general practice to School Dental Service. So all in all, I think it can be confidently said that the future is brighter today than it has been for some years past.

The Dental Inspections and Treatment carried out during the year compares favourably with that of previous years, but perhaps I may be permitted to pick on two items which seem to merit special mention. The first is the number of pupils supplied with artificial teeth. The figure this year is less than half that of last year, 38 this year as against 79 last year. Incidentally, it should be borne in mind that by no means are all the cases of artificial teeth wearers due to dental neglect. Fights, bicycle accidents, etc., account for quite a number of cases. The second point I would draw attention to is the number of orthodontic cases commenced during the year. This is almost double that of the previous year, 61 this year as against 32 last year. This type of treatment continues to be in increasing demand, very often at the request of the patient without any

parental prompting. Only a very small number of cases fall by the wayside before completion of treatment.

Again the number of pupils accepting treatment resulting from routine inspection is very satisfactory, the overall average acceptance rate from all schools being 75 per cent.

During the year, one of our Dental Surgery Assistants, Miss Freda Jones, was successful in passing the examination of the Dental Nurses' Association. To Miss Jones I offer my heartiest congratulations. My sincere thanks go to all members of the Dental Staff for so efficiently "keeping in business" during my absence, also to the School Medical Officers and other members of the Health and Welfare staff who so willingly have given their assistance at any time, however, indirectly it may have been.

*DENTAL INSPECTION AND TREATMENT CARRIED OUT
BY THE AUTHORITY DURING THE YEAR ENDED
31st DECEMBER, 1964*

Number of pupils on the registers of maintained primary and secondary schools (including nursery and special schools) in January, 1964, as in Forms 7, 7M, 8B and 11 Schools 12,892

(a) Dental and Orthodontic Work :

I Number of pupils inspected by the Authority's Dental Officers :

(i) At Periodic Inspections	...	...	...	5700	
(ii) At Special do.	...	...	...	2250	
				—	7950

II Number found to require treatment 5985

III Number offered treatment 4867

IV Number actually treated 3567

(b) Dental Work (other than Orthodontics) (Note : Figures relating to orthodontics should not be included in Section (b)) :

I Number of attendances made by pupils for treatment, excluding those recorded at (c) I below 6824

II Half days devoted to :

(i) Periodic (School) Inspection	...	...	...	49	
(ii) Treatment	...	...	...	815	
				—	864

III Fillings :

(i) Permanent Teeth	...	...	...	3787	
(ii) Temporary Teeth	...	...	...	512	
				—	4299

IV Number of Teeth Filled :

(i) Permanent Teeth	...	...	...	3228	
(ii) Temporary Teeth	...	...	...	458	
				—	3686

V Extractions :

(i) Permanent Teeth	...	...	...	1331	
(ii) Temporary Teeth	...	...	...	4217	
				—	5548

VI Administration of general anæsthetics for extraction ... 2715

VII Number of pupils supplied with artificial teeth 38

VIII Other operations :

(i) Crowns	3	} 12
(ii) Inlays	...	...	...	...	1
(iii) Other treatment : (Root Fillings)	...	...	...	...	8

(c) Orthodontics :

(i) Number of attendances made by pupils for orthodontic treatment	...	...	...	...	...	653
(ii) Half days devoted to orthodontic treatment	...	...	...	...	...	42
(iii) Cases commenced during the year	...	...	...	...	...	61
(iv) Cases brought forward from the previous year	...	...	...	...	...	59
(v) Cases completed during the year	...	...	...	...	...	29
(vi) Cases discontinued during the year	...	...	...	...	...	2
(vii) Number of pupils treated by means of appliances	...	...	...	...	...	72
(viii) Number of removable appliances fitted	...	...	...	...	...	70
(ix) Number of fixed appliances fitted	...	...	...	...	...	2

APPENDIX

MINISTRY OF EDUCATION

Medical Inspection Returns

Year ended 31st December, 1964

PART I—Medical Inspection of Pupils Attending Maintained and Assisted Primary and Secondary Schools (including Nursery and Special Schools).

TABLE A.—PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected (By year of birth)	No. of Pupils who have received a full medical examination	Physical Condition of Pupils Inspected		No. of Pupils found not to warrant a *medical examination
		Satisfac- tory No.	Unsatisfac- tory No.	
1	2	3	4	5
1960 and later	143	143	—	—
1959	484	484	—	—
1958	723	723	—	—
1957	63	62	1	—
1956	12	12	—	—
1955	11	10	1	—
1954	13	12	1	948
1953	16	16	—	—
1952	28	28	—	—
1951	33	33	—	—
1950	622	621	1	—
1949 and earlier	701	701	—	—
TOTALS ...	2849	2845	4	948

Col. (3) total as a
percentage of Col.
(2) total 99.86%

Col. (4) total as a
percentage of Col (2)
total 0.14%

} to two places
of decimals.

*Where selective medical examinations are being carried out enter in column (5) the number of pupils who have been 'interviewed' or 'discussed' at case conferences and found not to warrant a medical examination.

TABLE B.—PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS

(excluding Dental Diseases and Infestation with Vermin)

NOTES : Pupils found at Periodic Inspections to require treatment for a defect should not be excluded from Table B by reason of the fact that they were already under treatment for that defect.

Table B relates to individual pupils and not to defects. Consequently, the total in column (4) will not necessarily be the same as the sum of columns (2) and (3).

Age Groups Inspected (By year of birth) 1	For defective vision (excluding squint) 2	For any of the other conditions recorded in Part II 3	Total individual pupils 4
1960 and later	—	3	3
1959	—	36	35
1958	3	44	46
1957	1	10	11
1956	—	1	1
1955	2	—	2
1954	2	2	4
1953	3	1	4
1952	4	—	4
1951	4	—	4
1950	13	5	18
1949 and earlier	33	12	45
TOTALS ...	65	114	177

TABLE C.—OTHER INSPECTIONS

NOTES : A special inspection is one that is carried out at the special request of a parent, doctor, nurse, teacher or other person.

A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

Number of Special Inspections	...	...	...	376
Number of Re-inspections	...	...	...	355
Total	...	...	...	731

TABLE D.—INFESTATION WITH VERMIN

NOTES : All cases of infestation, however slight, should be included in Table D.

The numbers recorded at (b), (c) and (d) should relate to individual pupils, and not to instances of infestation.

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	23547
---	-----	-----	-----	-----	-----	-----	-------

(b) Total number of individual pupils found to be infested	1184
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	52
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3) Education Act, 1944)	2

PART II—Defects found by Medical Inspection during the year.

TABLE A.—PERIODIC INSPECTIONS

NOTE : All defects, including defects of pupils at Nursery and Special Schools, noted at periodic medical inspections should be included in this Table, whether or not they were under treatment or observation at the time of the inspection. This Table should include separately the number of pupils found to require treatment (T) and the number of pupils found to require observation (O).

Defect Code No.	Defect or Disease	Periodic Inspections							
		Entrants		Leavers		Others		Total	
		(T) 3	(O) 4	(T) 5	(O) 6	(T) 7	(O) 8	(T) 9	(O) 10
4	Skin	3	8	7	5	—	8	10	21
5	Eyes (a) Vision ...	4	5	53	4	18	15	75	24
	(b) Squint ...	11	16	—	—	4	7	15	23
	(c) Other ...	—	—	—	—	—	3	—	3
6	Ears (a) Hearing ...	14	17	—	4	6	7	20	28
	(b) OtitisMedia	6	18	1	3	—	6	7	27
	(c) Other ...	1	10	—	2	—	6	1	18
7	Nose and Throat ...	15	81	1	—	3	44	19	125
8	Speech	—	14	2	—	—	14	2	28
9	Lymphatic Glands .	1	4	—	1	—	3	1	8
10	Heart	—	26	—	4	1	10	1	40
11	Lungs	2	44	—	8	—	19	2	71
12	Developmental :								
	(a) Hernia ...	1	2	—	—	—	1	1	3
	(b) Other ...	3	53	1	3	1	21	5	77
13	Orthopædic :								
	(a) Posture ...	—	5	—	1	—	5	—	11
	(b) Feet	10	82	2	5	1	23	13	110
	(c) Other ...	6	56	7	4	1	38	14	98
14	Nervous System :								
	(a) Epilepsy ...	—	3	—	—	—	3	—	6
	(b) Other ...	—	6	—	5	—	3	—	14
	Psychological :								
	(a) Development.	3	15	—	1	—	4	3	20
	(b) Stability ...	—	43	1	—	—	6	1	49
16	Abdomen	—	—	—	—	—	—	—	—
17	Other	5	22	1	3	—	6	6	31

TABLE B—SPECIAL INSPECTIONS

NOTE : All defects, including defects of pupils at Nursery and Special Schools, noted at special medical inspections should be included in this Table, whether or not they were under treatment or observation at the time of the inspection.

Defect Code No.	Defect or Disease	Special Inspections	
		Requiring Treatment	Requiring Observation
4	Skin	432	3
5	Eyes (a) Vision	156	15
	(b) Squint	4	3
	(c) Other	2	—
6	Ears (a) Hearing	23	2
	(b) Otitis Media	3	2
	(c) Other	14	—
7	Nose and Throat	8	43
8	Speech	6	8
9	Lymphatic Glands	—	3
10	Heart	2	26
11	Lungs	5	24
12	Developmental :		
	(a) Hernia	1	2
	(b) Other	6	47
13	Orthopædic :		
	(a) Posture	1	4
	(b) Feet	11	34
	(c) Other	5	22
14	Nervous System :		
	(a) Epilepsy	—	—
	(b) Other	2	3
15	Psychological :		
	(a) Development	3	1
	(b) Stability	17	14
16	Abdomen	—	—
17	Other	70	14

PART III—Treatment of Pupils Attending Maintained and Assisted Primary and Secondary Schools (Including Nursery and Special Schools).

NOTES : This part of the return should be used to give the total numbers of :—

- (i) cases treated or under treatment during the year by members of the Authority's own staff.
- (ii) cases treated or under treatment during the year in the Authority's school clinics under National Health Service arrangements with the Regional Hospital Board ; and
- (iii) cases known to the Authority to have been treated or under treatment elsewhere during the year.

TABLE A.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	1
Errors of refraction (including squint) ...	935
TOTAL	936
Number of pupils for whom spectacles were prescribed	456

TABLE B.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment :	
(a) for diseases of the ear	7
(b) for adenoids and chronic tonsilitis ...	91
(c) for other nose and throat conditions...	16
Received other forms of treatment ...	117
TOTAL	231
Total number of pupils in schools who are known to have been provided with hearing aids :	
*(a) in 1964	—
(b) in previous years	16

*A pupil recorded under (a) above should not be recorded at (b) in respect of the supply of a hearing aid in a previous year.

TABLE C.—ORTHOPÆDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patient departments	307
(b) Pupils treated at school for postural defects	—
TOTAL	307

TABLE D.—DISEASES OF THE SKIN

(excluding uncleanness, for which see Table D of Part I)

						Number of cases known to have been treated
Ringworm (a) Scalp	...	...	...			—
(b) Body	...	...	...			—
Scabies	...	...	...	...	...	8
Impetigo	...	...	...	...	...	6
Other skin diseases	...	...	...	...	...	571
TOTAL	...	...	...	...	...	585

TABLE E.—CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics ...	96

TABLE F.—SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapists ...	106

TABLE G.—OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
(a) Pupils with minor ailments ...	45
(b) Pupils who received convalescent treatment under School Health Service arrangements ...	6
(c) Pupils who received B.C.G. vaccination	1136
(d) Other than (a), (b) and (c) above. Please specify :	
GENERAL MEDICAL ...	12
GENERAL SURGICAL ...	36
TOTAL (a)—(d) ...	1235

PART IV.

TABLE H.—HEIGHT

	Age	No. Examined 1964	1961 ft. ins.	1962 ft. ins.	1963 ft. ins.	1964 ft. ins.
BOYS						
Entrants	4	1	—	—	—	3 4
	5	180	3 6 $\frac{1}{2}$	3 6	3 6 $\frac{3}{4}$	3 6
	6	410	3 7	3 7 $\frac{1}{2}$	3 7 $\frac{1}{2}$	3 7
	7	37	3 10 $\frac{1}{4}$	3 10 $\frac{1}{2}$	3 11	3 9
Second age Group	8	—	—	—	—	—
„	10	—	—	—	—	—
„	11	—	—	—	—	—
Third age Group ...	14	426	5 4	5 3	5 3	5 3
Other Periodic Inspections : (Nursery Classes)	3	3	3 2	3 2	3 0	3 2
	4	63	3 3	3 3 $\frac{1}{2}$	3 3	3 3
	5	85	3 4 $\frac{3}{4}$	3 5 $\frac{1}{4}$	3 4 $\frac{1}{2}$	3 4
GIRLS						
Entrants	4	—	—	—	—	—
	5	144	3 6	3 5 $\frac{3}{4}$	3 6 $\frac{1}{4}$	3 5 $\frac{3}{4}$
	6	337	3 7	3 7	3 7 $\frac{1}{4}$	3 7
	7	34	3 10	3 9 $\frac{1}{4}$	3 9	3 9 $\frac{1}{2}$
Second age Group	8	—	—	—	—	—
„	10	—	—	—	—	—
„	11	—	—	—	—	—
Third age Group ...	14	397	5 1 $\frac{3}{4}$	4 11 $\frac{1}{2}$	5 1 $\frac{3}{4}$	5 1
Other Periodic Inspections : (Nursery Classes)	3	—	3 2	3 5 $\frac{1}{2}$	3 1	—
	4	76	3 3	3 2	3 3	3 2 $\frac{3}{4}$
	5	65	3 4 $\frac{3}{4}$	3 4 $\frac{1}{2}$	3 4	3 4

TABLE J.—WEIGHT

	Age	No. Examined 1964	1961 st. lb.	1962 st. lb.	1963 st. lb.	1964 st. lb.
BOYS						
Entrants	4	1	—	—	—	2 12
	5	180	2 13 $\frac{1}{4}$	2 12 $\frac{3}{4}$	2 13 $\frac{1}{2}$	2 12
	6	410	3 0 $\frac{3}{4}$	3 1	3 1 $\frac{3}{4}$	3 0 $\frac{3}{4}$
	7	37	3 6 $\frac{3}{4}$	3 6	3 9	3 5 $\frac{1}{2}$
Second age Group	8	—	—	—	—	—
„	10	—	—	—	—	—
„	11	—	—	—	—	—
Third age Group ...	14	426	8 0 $\frac{1}{4}$	8 0 $\frac{1}{4}$	7 12 $\frac{1}{4}$	7 12 $\frac{3}{4}$
Other Periodic Inspections : (Nursery Classes)	3	3	2 6	2 4 $\frac{1}{2}$	2 3	2 8 $\frac{1}{4}$
	4	63	2 8	2 8	2 8 $\frac{1}{4}$	2 7 $\frac{1}{2}$
	5	85	2 11 $\frac{1}{4}$	2 10 $\frac{3}{4}$	2 10	2 11
GIRLS						
Entrants	4	—	—	—	—	—
	5	144	2 12 $\frac{1}{4}$	2 11 $\frac{3}{4}$	2 11	2 11 $\frac{3}{4}$
	6	337	2 13 $\frac{1}{2}$	2 13 $\frac{3}{4}$	3 0	2 13 $\frac{1}{4}$
	7	34	3 8 $\frac{3}{4}$	3 5 $\frac{1}{4}$	3 4 $\frac{1}{4}$	3 5 $\frac{3}{4}$
Second age Group	8	—	—	—	—	—
„	10	—	—	—	—	—
„	11	—	—	—	—	—
Third age Group ...	14	397	7 13 $\frac{3}{4}$	7 12 $\frac{1}{4}$	7 11 $\frac{3}{4}$	8 0 $\frac{1}{4}$
Other Periodic Inspections : (Nursery Classes)	3	—	2 6 $\frac{3}{4}$	2 8 $\frac{1}{2}$	2 4	—
	4	76	2 7 $\frac{1}{4}$	2 5 $\frac{1}{2}$	2 7	2 6 $\frac{3}{4}$
	5	65	2 10 $\frac{1}{4}$	2 10	2 9 $\frac{1}{2}$	2 10

STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED BY THE LOCAL
EDUCATION AUTHORITY TO THE LOCAL HEALTH AUTHORITY
DURING THE YEAR 1964

	Boys	Girls
Notified under Section 57 of the Education Act, 1944, as amended by the Mental Health Act, 1959	6	3

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